

City of Las Vegas



Las Vegas Fire & Rescue

Records Division
500 N Casino Center Blvd
Las Vegas, NV 89101
(702) 229-0147
FAX (702) 383-1168
lvfrrecords@lasvegasnevada.gov

HOW TO OBTAIN OFFICIAL REPORTS

FIRE REPORTS

Fire incident reports are considered public record and are available upon request. Fire reports are available at the above address during normal business hours Monday through Friday from 8:00 AM to 5:00 PM.

- It is suggested that you first call (702) 229-0147 to ensure the report is available.
- You will need to provide the date and the address of the incident.
- Requests can also be mailed or faxed to our office. Please complete a records/information request form and send it to the above address or fax number.

MEDICAL AID / TRANSPORT RECORDS

Reports involving any type of medical treatment are considered confidential information and are protected by law. These reports may be released only to the patient or an authorized representative or agent of the patient.

Per Las Vegas Fire & Rescue requirements we need the following items before we can release medical records:

- ✓ A NOTARIZED medical release signed by the patient. If a notarized release is not available to you, the records will need to be requested by Subpoena.
- ✓ A copy fee of \$1.00 per page applies to all requests for records.
- ✓ Completed records / information request form.

ATTORNEY / INSURANCE COMPANIES

- Please note that all requests from attorneys or insurance companies for medical records and a billing statement must be accompanied by a **NOTARIZED RELEASE** signed by the patient.
- Requests received for medical records **WITHOUT** a notarized release will be **returned** to sender.
- Please include the patient's name, date of incident and incident location on your request for records.

- Requests for records can be mailed or faxed to our office at the above address and fax number.

PATIENT

- The patient may pick up a copy of their records in person by presenting valid photo identification.
- If the patient is a minor child, a parent or legal guardian must present valid photo identification and a birth certificate for the minor patient.
- If the patient is deceased, you must provide a death certificate naming you as the next of kin and provide your photo identification.

A copy fee of \$1.00 per page applies to all requests for records. Please note that Las Vegas Fire & Rescue is neither a “provider of health care” as defined in NRS 629.031 nor is it a “person” as defined in NRS 0.039; and therefore NOT bound by the limitations of the \$.60 copying fee as set forth in NRS 629.061.

FIRE INVESTIGATION REPORTS

The following process will be followed for the request of Investigative reports:

- Contact the Bureau of Fire Investigations directly to request Investigative Reports at (702) 229-0072.
- A Records/Information request and an Authorization for Release of Investigative Reports must be completed by the requestor.
- Current photo identification is required.
- The Fire Investigations Commander or his designee will determine if the report can be released.
- The Investigators do not automatically investigate each fire.
- The minimum time frame for Investigative reports to be complete will be three (3) weeks. For a larger than normal incident occurrence, that time frame will expand.
- Investigators will not be available for comments or questions regarding incidents without being subpoenaed or receiving a request of deposition.

CITY OF LAS VEGAS FIRE & RESCUE
RECORDS/INFORMATION REQUEST
500 North Casino Center Blvd
Las Vegas, Nevada 89101
(702) 229-0147 Phone / (702) 383-1168 Fax

DATE REQUESTED:	INCIDENT #:
<div style="display: flex; justify-content: space-between;"> _____ FIRE REPORT _____ MEDICAL AID REPORT _____ OTHER </div>	
IF OTHER, PLEASE DESCRIBE:	
LOCATION OF OCCURRENCE/ACTIVITY:	
DATE AND APPROXIMATE TIME OF OCCURRENCE:	
NAME OF OWNER/OCCUPANT/VICTIM/OR BUSINESS AT LOCATION:	
NAME/ADDRESS OF PERSON REQUESTING INFORMATION	
NAME:	
STREET:	
CITY:	
STATE:	ZIP:
PHONE:	FAX:
REQUESTOR'S SIGNATURE:	

One Dollar (\$1.00) per page.
Two Dollars (\$2.00) for certification of each copy.
Make Checks Payable to the City of Las Vegas

TOTAL # OF PAGES	_____	@	\$1.00	=	\$	
CERTIFICATION FEE	_____	@	\$2.00	=	\$	
			TOTAL COST	=	\$	

RECORDS CLERK: DOES ANY OF THE ABOVE INFORMATION REQUESTED REQUIRE A SUBPOENA OR NOTARIZED RELEASE SIGNED BY THE PATIENT?

Signature of Records Clerk:

Check #	Transaction #
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